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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

|   |   |                        |                             |
|---|---|------------------------|-----------------------------|
| <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b> |   | Attorney Docket Number | PU050005                    |
|   |   | First Named Inventor   | Jill MacDonald Boyce et al. |
| <b>COMPLETE IF KNOWN</b>  |   |                        |                             |
| Declaration Submitted With Initial Filing                                 | Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Application Number     | /                           |
|   |   | Filing Date            |                             |
|   |   | Group Art Unit         |                             |
|   |   | Examiner Name          |                             |

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR COMPLEXITY SCALABLE VIDEO DECODER**

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

March 31, 2005

as United States Application Number or PCT International

Application Number

PCT/US2005/010436

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | YES                      | NO                       |
|-------------------------------------|---------|--|--------------------------|--------------------------|--------------------------|
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) |  |
|-----------------------|--------------------------|--|
| US 60/558,862         | April 2, 2004            | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

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or Bar Code Label 24498 OR  Correspondence address below

|                   |                           |                         |  |
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| Name              | JOSEPH S. TRIPOLI         |                         |  |
| Address           | THOMSON LICENSING INC.    |                         |  |
| Address           | PO Box 5312               |                         |  |
| City<br>PRINCETON | State<br>NJ               | ZIP<br>08543-5312       |  |
| Country<br>USA    | Telephone<br>609-734-6807 | Fax<br>(609) 734 - 6888 |  |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

|   |                     |   |                   |
|---|---------------------|---|-------------------|
| NAME OF SOLE OR FIRST INVENTOR:   |                     | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name<br>JILL MACDONALD  |                     | Family Name BOYCE<br>or Surname   |                   |
| Inventor's<br>Signature<br><i>Jill MacDonald Boyce</i>  | Date<br>6/1/05      |   |                   |
| Residence: City<br>Manalapan  | State<br>New Jersey | Country<br>US   | Citizenship<br>US |
| Mailing Address   |                     |   |                   |
| Mailing Address 3 Brandywine Court  |                     |   |                   |
| City<br>Manalapan   | State<br>New Jersey | ZIP<br>07726  | Country<br>US     |
| NAME OF SECOND INVENTOR:  |                     | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name<br>ALEXANDROS MICHAEL  |                     | Family Name TOURAPIS<br>or Surname  |                   |
| Inventor's<br>Signature   | Date                |   |                   |
| Residence: City<br>Santa Clara  | State<br>CA         | Country<br>US   | Citizenship<br>GR |
| Mailing Address   |                     |   |                   |
| Mailing Address 1550 Vista Club Circle, #304  |                     |   |                   |
| City<br>Santa Clara   | State<br>California | ZIP<br>95054  | Country<br>US     |
| <input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. |                     |   |                   |

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| Country<br>USA    | Telephone<br>609-734-6807 | Fax<br>(609) 734 - 6888 |  |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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|---|---------------------|---|-------------------|
| NAME OF SOLE OR FIRST INVENTOR:   |                     | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name<br>JILL MACDONALD  |                     | Family Name<br>BOYCE<br>or Surname  |                   |
| Inventor's Signature  |                     |   | Date              |
| Residence: City<br>Manalapan  | State<br>New Jersey | Country<br>US   | Citizenship<br>US |
| Mailing Address<br>Mailing Address 3 Brandywine Court   |                     |   |                   |
| City<br>Manalapan   | State<br>New Jersey | ZIP<br>07726  | Country<br>US     |
| NAME OF SECOND INVENTOR:  |                     | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name<br>ALEXANDROS MICHAEL  |                     | Family Name<br>TOURAPIS<br>or Surname   |                   |
| Inventor's Signature  |                     | Date<br>05/31/2005  |                   |
| Residence: City<br>Santa Clara  | State<br>CA         | Country<br>US   | Citizenship<br>GR |
| Mailing Address<br>Mailing Address 1550 Vista Club Circle, #304   |                     |   |                   |
| City<br>Santa Clara   | State<br>California | ZIP<br>95054  | Country<br>US     |
| <input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. |                     |   |                   |

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

|                               |                                    |
|-------------------------------|------------------------------------|
| <b>Application Number</b>     |                                    |
| <b>Filing Date</b>            |                                    |
| <b>First Named Inventor</b>   | Jill MacDonald Boyce et al.        |
| <b>Title</b>                  | Complexity Scalable Video Decoding |
| <b>Art Unit</b>               |                                    |
| <b>Examiner Name</b>          |                                    |
| <b>Attorney Docket Number</b> | PU050005                           |

I hereby appoint:

 Practitioners at Customer Number**Customer Number 24498***OR* Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
|      |                     |
|      |                     |
|      |                     |
|      |                     |
|      |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

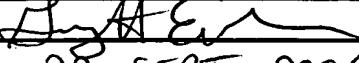
Please recognize or change the correspondence address for the above-identified application to:

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|   |                                   |       |              |     |            |
|---|-----------------------------------|-------|--------------|-----|------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Joseph J. Laks, Patent Operations |       |              |     |            |
| Address   | THOMSON LICENSING INC.            |       |              |     |            |
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| City  | PRINCETON                         | State | NJ           | ZIP | 08543-5312 |
| Country   | USA                               |       |              |     |            |
| Telephone   | 609-734-6820                      | Fax   | 609-734-6888 |     |            |

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).***SIGNATURE of Applicant or Assignee of Record**

|           |   |           |              |
|-----------|---|-----------|--------------|
| Name      | Guy H. Eriksen, Reg. No. 41,736   |           |              |
| Signature |  |           |              |
| Date      | 22 SEPT 2006  | Telephone | 609-734-6807 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of 5 forms are submitted.

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THOMSON RESEARCH FUNDING CORPORATION

We,

Thomson Research Funding Corporation  
10330 North Meridian Street  
INH 340  
Indianapolis, Indiana 46290 USA

do hereby grant

Joseph S. Tripoli  
Senior Vice President  
Thomson Licensing Inc.  
Two Independence Way  
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from September 1, 2003.

DATED this 15<sup>th</sup> day of September, in the year 2003.

SIGNED Kumar Ramaswamy  
Kumar Ramaswamy  
President

September 15, 2003

DAVIDA FORNAROTTO  
Notary Public

**DAVIDA P. FORNAROTTO**  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Exp. Jan. 28, 2007

**POWER OF ATTORNEY**  
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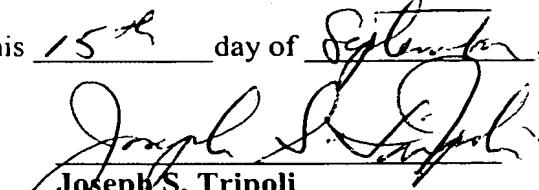
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Joseph J. Laks - Vice President  
Ronald H. Kurdyla - Manager, U.S. Patent Operations  
Harvey D. Fried - Manager, U.S. Patent Operations  
Robert D. Shedd - Manager, U.S. Patent Operations  
Thomson Licensing Inc.  
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DATED this 15<sup>th</sup> day of September, 2003.

SIGNED

  
Joseph S. Tripoli  
Senior Vice President  
Thomson Licensing Inc. and  
Attorney In Fact for  
Thomson Research Funding Corporation

WITNESS

  
Davida Foenavatto

POWER OF ATTORNEY  
THOMSON RESEARCH FUNDING CORPORATION

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Indianapolis, Indiana 46290 USA

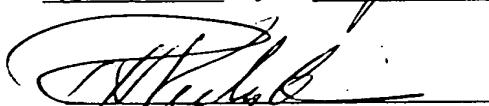
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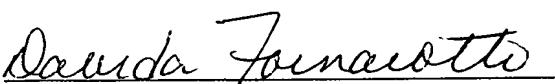
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DATED this 21 day of April, 2004.

SIGNED

  
Ronald H. Kurdyla  
Sr. Patent Counsel  
Thomson Licensing Inc. and  
Attorney In Fact for  
Thomson Research Funding Corporation

WITNESS



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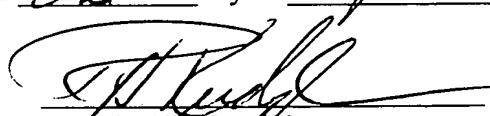
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